Sinneave
FAMILY FOUNDATION

Neuroaffirming Language Guide

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Table of Contents

Introduction

Language plays a role in how we understand people, experiences, and environments. It guides how we think about and treat others and reflects and reinforces which ways of being are expected. Whether we mean to or not, the words we choose influence who is accepted, supported, and understood, and who may feel like they do not belong.

A neuroaffirming approach recognizes and supports different ways of thinking, learning, and communicating, and values this diversity. This guide takes a neuroaffirming approach to language and encourages us to think more carefully about how our words contribute to assumptions about others. This applies not only to how we talk with neurodivergent people, but also to how we describe everyday systems and expectations.

Language changes over time, and so do people's preferences. This guide reflects what we have learned from Autistic and other neurodivergent communities. It will continue to evolve as language and understanding change. Adjusting how we communicate can feel unfamiliar or uncomfortable at first, but it is a simple and meaningful way to show respect and care.

Scope and Purpose

You can use this guide in any setting. Whether you are writing an email, teaching a class, or just having a conversation, this guide applies to all forms of communication. It helps us notice language patterns that might unintentionally exclude, stereotype, or oversimplify someone's experience, and it offers alternative, neuroaffirming ways to communicate.

This guide is not a checklist or a set of rules. It does not provide fixed rules for every situation, nor does it identify every possible term that may cause harm. Language is personal and context dependent, and preferences vary across individuals and communities. This guide identifies language that is generally considered more neuroaffirming, while recognizing that no single term or approach will be preferred by everyone.

The most respectful approach is to ask people how they prefer to be described, and to use those preferences. This guide supports reflection, learning, and intentional communication. It is not about perfection. The goal is to encourage neuroaffirming language in all our communication, so that more people feel like they belong.[1]

[1] For additional guidance, refer to Sinneave's 6 Principles for Inclusion.

How to Use This Guide

How Each Section is Organized

This guide is organized by topic, with each topic divided into multiple sections. Each section lists widely preferred neuroaffirming language first, followed by less preferred language. A brief explanation and at least one example are then provided to give context for how the language is used.

Understanding the Language Categories

Neuroaffirming (Widely Preferred) Language reflects language that many Autistic and other neurodivergent people currently consider neuroaffirming. It is not necessarily the only or most appropriate language in every situation, and individual preferences and contexts vary.

Less Preferred Language reflects language that may not be accurate or neuroaffirming, or it may carry unintended negative meanings. This does not mean a term is always offensive, although some terms may be harmful depending on the context.

Finding a Specific Word

If you want to find a specific word or phrase, you can search the document using Control (Ctrl) + F (Windows) **or** Command (Cmd) + F (Mac).

You can also check the Glossary at end of the guide, starting on page 33. It lists preferred and less preferred language in alphabetical order and includes page numbers to help you quickly find the relevant section(s).

Quick Reference Table

Also at the end of this guide, starting on page 43, you will find a Quick Reference Table. It shows the same language used in the guide, but in a simple table. The table lists Neuroaffirming (Widely Preferred) Language beside the Less Preferred Language. Unlike the main guide, it does not include explanations or examples, only the words and phrases.
We recommend reading the full guide first to learn the reasoning behind the language. After that, you can use the Quick Reference Table as a reminder.

What Neuroaffirming Language Is

Neuroaffirming language intentionally recognizes, respects, and values all neurotypes. It prioritizes neurodivergent perspectives and lived experience, avoids negative or harmful framing, and affirms neurodivergent identities. Neuroaffirming language helps build belonging and create spaces where all people feel respected and included.

Useful Vocabulary

A few terms are worth understanding clearly, as they are sometimes used interchangeably, even though the terms mean different things.

Neurodiversity

Neurodiversity is a term that acknowledges that all brains work a little differently, and that these differences are natural, expected, and make valuable contributions to society. Using the term neurodiversity respects that there is no one right way of thinking, learning, and behaving.

Example:
"Neurodiversity is a natural part of being human, and exists across all groups, communities and cultures."

Neurotype

A neurotype refers to a person's particular pattern of how their brain processes information.

Example:
"Just like everyone has a blood type, everyone has a neurotype—whether they are neurodivergent or neurotypical."

Neurodivergence

Neurodivergence refers to the variations in how people's brains process information, compared to what is most commonly observed among large groups of people.

Example:
"Autism is one form of neurodivergence, alongside ADHD, dyslexia, and others—each reflecting a different way the brain can diverge from common patterns of processing."

Neurodivergent

Neurodivergent describes a person or group whose brains processes information in ways that differ from what is most commonly observed among large groups of people.

Example:
"Neurodivergent people bring valuable perspectives and strengths."

Neurotypical

Neurotypical describes a person whose brain processes information in a way that aligns with what is most commonly observed among large groups of people.

Example:
"Using the word 'neurotypical' instead of 'normal' acknowledges that all brain types and ways of processing are valid."

Using Neuroaffirming Language

How We Talk About Autism and Neurodivergence

Neuroaffirming language treats autism and neurodivergence as natural parts of human variation, not as problems to solve. In practice, this means choosing words that describe difference without presenting someone's identity as an illness, something negative, or something to be fixed.

Naming Autism and Neurodivergence

Neuroaffirming (Widely Preferred) Language:

- ✓ **Autism**
- ✓ **Autistic**
- ✓ **Neurodivergent**
- ✓ **Neurotype**
- ✓ **On the spectrum**

Less Preferred Language: Asperger's, Autism Spectrum Condition (ASC), Autism Spectrum Disorder (ASD), differently abled, disease, disorder, illness.

The neuroaffirming language listed above is widely preferred in Autistic and other neurodivergent communities because it reflects autism and neurodivergence as natural variations, rather than medical problems. Asperger's is no longer a separate diagnostic category from autism. While some people still use the term for themselves, many avoid it due to its historical associations and connection to outdated diagnostic classifications.

Example:

"They were diagnosed as Autistic at age 7."

Capitalizing Autistic

Neuroaffirming (Widely Preferred) Language:

✓ **Autistic (capital A)**

Less Preferred Language: autistic (lowercase a).

Capitalizing “Autistic” recognizes the culture and community that has formed around Autistic identity, similar to how “Deaf” and “Black” are capitalized when referring to those communities. The term “non-autistic” is often written in lowercase, as it does not carry the same cultural meaning.

Examples:

“They are Autistic.”

“The workshop is open to Autistic and non-autistic participants.”

Describing the Spectrum

Neuroaffirming (Widely Preferred) Language:

✓ Describing the autism spectrum as multidimensional

Less Preferred Language: Describing the autism spectrum as linear

Autism is multidimensional, meaning every Autistic person has their own unique mix of strengths, experiences, characteristics, and support needs. Someone might need more support in one area of their life, and very little in another.

Many Autistic people describe themselves as being “on the spectrum,” and the term is widely used and meaningful across communities. In other contexts, however, the word “spectrum” is often used to describe a single, linear range (e.g., from low to high). Because of this, some people mistakenly assume the autism spectrum works the same way. However, the autism spectrum is multidimensional rather than linear, reflecting the diversity and complexity of Autistic experiences.

Example:
“When I think of the autism spectrum, I am reminded that every Autistic person has their own unique mix of strengths, experiences, and support needs.”

World Autism Day / World Autism Month

Neuroaffirming (Widely Preferred) Language:

- ✓ **Autism Acceptance Day / Month**
- ✓ **World Autism Day / Month**

Less Preferred Language: **Autism Awareness Day / Month.**

Language such as “Autism Acceptance Day / Month” and “World Autism Day / Month” emphasize inclusion, respect, belonging, and meaningful action. While “Autism Awareness Day / Month” is still widely used, many people prefer acceptance-focused or neutral language because it moves beyond simply recognizing that autism exists.

Example:

“Today is World Autism Day.”

How We Talk About Identity and People

The words we use to describe people influence how they are understood and valued. A neuroaffirming approach respects each person's identity and recognizes them as a whole person. It focuses on who people are, rather than assumptions about who they should be or what they lack. This includes respecting the language people choose for themselves, recognizing that they describe themselves best.

Affirming Identity

Neuroaffirming (Widely Preferred) Language:

- ✓ **Identity-first language: Autistic, Autistic individual, Autistic people, Autistic person.**

Less Preferred Language: Person-first language (e.g., person with autism).

Identity-first language (e.g., Autistic person) reflects the view of many Autistic people that being Autistic is a core part of who they are, not something separate from them. It recognizes autism as part of a person's identity.

Person-first language (e.g., person with autism) was developed with good intentions, and some Autistic people continue to prefer it. At the same time, many Autistic people find that it can suggest autism is something negative or separate from their identity.

Always follow an individual's stated preference. Respecting how someone chooses to describe themselves is part of neuroaffirming practice.

Examples:

"Amari is Autistic."

"The program supports Autistic individuals."

Using Humanizing Language

Neuroaffirming (Widely Preferred) Language:

✓ **Autistic, Autistic individual, Autistic people, Autistic person.**

Less Preferred Language: Affected by, cases, impacted by, patients, suffers from.

Using language like “Autistic person,” “Autistic people,” or “Autistic individual” keeps the focus on people and recognizes them as whole individuals. Terms like “cases” or “patients” can sound clinical and remove that sense of personhood. Similarly, phrases like “suffers from” or “affected by” can imply that being Autistic is something negative.

Examples:

“There are 8 Autistic people signed up for the workshop.”

“Yolan is Autistic.”

How We Describe Experiences and Expression

Autistic and other neurodivergent people experience and navigate the world in ways that may differ from neurotypical norms, but different is not wrong. Neuroaffirming language describes those differences clearly and specifically, without presenting them as failures or deficits.

Describing A Person's Spoken Language Use

Neuroaffirming (Widely Preferred) Language:

- ✓ **Communicates beyond spoken words / in many ways**
- ✓ **Nonspeaking**
- ✓ **Sometimes / at times nonspeaking**

Less Preferred Language: Limited speech, nonverbal (when used as a label for a person), selectively verbal.

When referring to how a person uses little or no spoken language, terms like "nonspeaking" or "sometimes nonspeaking" reflect that communication can happen in many ways beyond spoken language. Many nonspeaking people use Augmentative and Alternative Communication (AAC), writing, gestures, and other forms of expression. The term "nonverbal" can suggest an absence of communication rather than a difference in how communication happens, particularly when it is used as a label for a person (e.g., "she is nonverbal" or "nonverbal individuals").

Examples:

"Priya is at times nonspeaking and mostly uses a combination of gestures and written communication."

"Imaan is nonspeaking and communicates effectively using an AAC device."

Describing “Nonverbal” as a Form of Communication

Neuroaffirming (Widely Preferred) Language:

✓ **“Nonverbal” used to describe a different form of communication, with consideration of context and framing.**

Less Preferred Language: “Nonverbal” used to describe a different form of communication, without consideration of context and framing

The term “nonverbal” can be accurate and appropriate when referring to or describing communication that does not rely on spoken words (i.e., gestures, facial expressions, body language, and other forms of expression). When used carefully, it describes a mode of communication rather than labelling a person.

Example:
“Amari used nonverbal cues, including covering their ears and stepping away, to communicate that they were overwhelmed.”

In autism- and neurodivergent-serving contexts, the term “nonverbal” can carry additional associations because it has often been used as a label for people who do not use spoken language. As a result, even when the term is being used to describe a form of communication, some people may still associate it with a lack of communication rather than recognizing the different ways people communicate. The concern is not the word itself, but whether it may lead people to assume something about a person’s ability to express their thoughts and feelings.

When using “nonverbal” in autism- or neurodivergent-focused materials, choose wording that clearly describes a mode of communication, and affirms that neurodivergent people communicate in many meaningful ways.

→ **Please refer to the next page for an additional example.**

Example:

For a workshop designed for Autistic adults on forms of communication that do not rely on spoken words, a title such as “Communication Beyond Words” avoids “nonverbal” in the title while still accurately representing the workshop. The workshop description can still use the term clearly and specifically, where the surrounding context makes it clear that “nonverbal” refers to a specific form of communication: “This workshop explores nonverbal cues such as gestures and facial expressions.”

Describing Experiences Accurately and Without Judgement

Neuroaffirming (Widely Preferred) Language:

- ✓ **Neutral facial expressions**
- ✓ **Sensory processing differences**
- ✓ **Specific Autistic experiences, features, traits, or characteristics**
- ✓ **Uses less eye contact**

Less Preferred Language: Difficulty with facial expressions, impairments, poor eye contact, sensory processing disorder, symptoms, tendencies.

Describing experiences with neutral, specific language helps reflect what is observable without judgement or comparison. Terms such as “neutral facial expressions,” “prefers less eye contact,” and “sensory processing differences” describe what is happening clearly and without framing it as a problem.

This approach also focuses on the experience being described, rather than automatically identifying someone as Autistic or neurodivergent. In some situations, naming autism or neurodivergence may be relevant and helpful. In others, describing the experience, situation, or environment itself provides clearer and more useful information. For example, describing a space as loud or overwhelming focuses on the experience itself, rather than attributing it to someone being Autistic or neurodivergent when that detail is not needed.

Examples:

“Alex prefers reduced eye contact; it helps them focus on what you are saying.”

“Morgan experiences some sensory processing differences and prefers environments with dim lighting and a quieter volume.”

Describing Masking

Neuroaffirming (Widely Preferred) Language:

✓ Masking

Less Preferred Language: **Hiding traits, passing as neurotypical.**

Masking (a form of camouflaging) refers to when Autistic people suppress Autistic characteristics to navigate neurotypical environments and expectations. It is not always conscious or intentional. While masking may help someone navigate certain situations, it often takes significant effort, is exhausting, and can be harmful over time. Referring to this experience as “masking” describes it accurately, without framing it as a goal, expectation, or achievement.

Example:

“Jaime often masks in social settings and is frequently perceived as coping well, but the effort leaves them feeling exhausted afterward.”

Describing Interests Respectfully

Neuroaffirming (Widely Preferred) Language:

- ✓ **Area of expertise**
- ✓ **Focused interest(s)**
- ✓ **Passion(s) / passionate**

Less Preferred Language: Fixation, obsessed, rigid interests, special interests.

Everyone has interests. Terms such as “focused interests,” “passions,” and “areas of expertise” describe deep engagement in a neutral and respectful way. These terms focus on a person’s interests, strengths, and knowledge without framing them as unusual or problematic.

Example:

“One of Shane’s focused interests is bikes. They have extensive knowledge about bikes.”

Describing Behaviour Accurately and Without Judgement

Neuroaffirming (Widely Preferred) Language:

- ✓ **Describe specifically what is directly observed** (e.g., covering ears, pacing, not responding to questions)
- ✓ **Describe what the person reports experiencing, where appropriate**

Less Preferred Language: Challenging behaviour, disruptive behaviour, outburst, problem behaviour, tantrum.

The language used to describe behaviours and experiences can shape how they are understood. A neuroaffirming approach describes what is directly observed and, where appropriate, what the person reports experiencing, rather than assigning labels that may imply intent or choice. Describing behaviour specifically instead of using labels such as “tantrum,” “outburst,” or “problem behaviour” supports a more accurate understanding and reduces the risk of misinterpretation.

Alongside descriptions of observable behaviour, there are also widely recognized (and professionally established) terms, such as “stimming,” “meltdown,” “shutdown,” “sensory overload” and “burnout,” that describe experiences that may be reflected in observable behaviour. These terms are used by Autistic and other neurodivergent people, their families, clinicians, or researchers to describe specific experiences. These terms can be validating and empowering because they recognize experiences that are not voluntary or within a person’s control. However, these terms describe internal experiences that may underlie a range of observable behaviours (e.g., two people may display similar behaviours while experiencing different internal states). For this reason, these terms are not included under either “Neuroaffirming (Widely Preferred) Language” or “Less Preferred Language.” Instead, they are acknowledged here because they may be appropriate when they reflect a person’s reported experience or preferred language.

→ **Please refer to the next page for an example.**

Example:

“Norm covered their ears, paced, and moved to a quieter area after the volume of the music increased.”

How We Describe Supports and Needs

Neuroaffirming language describing supports focuses on what a person needs to participate and thrive in the world, specifically and without judgment. It avoids language that implies Autistic or other neurodivergent people need to be fixed, cured, or changed.

Describing Supports Accurately

Neuroaffirming (Widely Preferred) Language:

- ✓ **Accommodations / adjustments**
- ✓ **Naming the specific supports and services**
- ✓ **Support(s)**

Less Preferred Language: **Cure, fix, intervention, prevention, treat, treatment.**

Supports, accommodations, adjustments, and services help people participate, communicate, access opportunities, and thrive. Neuroaffirming language focuses on the specific supports being provided rather than suggesting a person needs to be changed. Language that describes supports as “cures” or “treatments” can imply that something is wrong, rather than recognizing neurodivergence as a natural part of human variation.

Examples:

“We can adjust the environment so that Parker can participate fully and meaningfully.”

“I wish more supports were available for Autistic and neurodivergent adults.”

“Programs like Launch + Skills can support Quinn in exploring and practicing different ways of communicating in social situations, if they are interested.”

Describing Needs Specifically

Neuroaffirming (Widely Preferred) Language:

- ✓ **Naming the specific support needs of a person**
- ✓ **Varied / variable support needs**

Less Preferred Language: **High-functioning, high support needs, low-functioning, low support needs, mild, moderate, severe, special needs.**

Support needs are individual, specific, and can change depending on the situation or environment. Someone might need more support in one context and less in another. Describing a person's actual support needs gives clearer, more useful information and better reflects the complexity of their lived experience. A neuroaffirming approach focuses on the specific supports a person needs in each situation.

Broad labels such as "special needs," "high-functioning," or "severe" can oversimplify a person's experiences. These labels may hide what supports someone needs, limit access to support, or reduce a person's autonomy and choice. For example, "high-functioning" is often used to deny support to someone who appears to be managing, while "low-functioning" is often used to deny agency to someone assumed to be incapable.

Examples:

"Sam is accompanied by a 24-hour support person."

"Emma thrives when given advance notice of schedule changes and a quiet space to use as needed."

"Rajit uses an AAC device and receives support with daily living tasks."

"Bonnie has varied support needs. They excel academically and thrive with a support person available during social situations."

Describing Executive Functioning

Neuroaffirming (Widely Preferred) Language:

✓ **Executive functioning**

Less Preferred Language: **Executive dysfunction.**

Executive functioning refers to the cognitive processes that support planning, organizing, focusing, initiating tasks, and following through on activities. Describing it as "executive functioning" instead of "executive dysfunction" focuses on these processes without framing the person as broken, deficient, or incapable.

Example:

"Lila uses detailed lists and timers to support their executive functioning."

Naming Support Roles

Neuroaffirming (Widely Preferred) Language:

✓ **Support person**

Less Preferred Language: **Caregiver, caretaker.**

"Support person" respects the right of the person being supported to actively participate in decisions about their life to the greatest extent possible. Terms like "caregiver" or "caretaker" can sometimes reinforce assumptions that the person receiving support has fewer abilities or less involvement in decisions about their own life than they do.

Example:

"Ahmed will be attending with his support person."

Describing Accessible Spaces

Neuroaffirming (Widely Preferred) Language:

✓ Accessible

Less Preferred Language: **Disabled (when describing spaces or facilities), handicapped.**

When describing spaces or facilities, “accessible” focuses on the environment and the features that support participation for a wide range of people. This language places responsibility on the environment to be accessible, rather than on individuals to adapt to barriers in the environment.

Example:

“We have accessible bathrooms available for use.”

How We Talk About Identification and Diagnosis

How we talk about identifying and diagnosing autism matters. Neuroaffirming language in this context is observational and neutral. It describes what is being noticed without implying that being Autistic is a danger, a burden, or a crisis.

Talking About Prevalence

Neuroaffirming (Widely Preferred) Language:

- ✓ **A better understanding of autism and broader diagnostic criteria**
- ✓ **Improved access to assessment and diagnosis**
- ✓ **More Autistic people are being formally identified**
- ✓ **Reported autism prevalence has increased**

Less Preferred Language: Autism crisis, epidemic, surge in autism.

Research suggests that increases in reported autism prevalence are best understood as reflecting multiple contributing factors, including broader diagnostic criteria, greater awareness, and improved access to assessment. These findings do not necessarily mean that there are more Autistic people. Rather, they indicate that more people who are already Autistic are now being formally identified through assessments, including many who were previously unrecognized or misidentified. Language that reflects this understanding recognizes neurodivergence as a natural part of human diversity. In contrast, terms such as “crisis,” “epidemic,” or “surge” can imply a public health emergency and may contribute to misunderstanding and stigma.

→ **Please refer to the next page for an example.**

Examples:

“Reported autism prevalence has increased in recent years, likely reflecting broader diagnostic criteria, greater awareness of autism, and improved access to assessment.”

“More people are being identified as Autistic today than in previous decades, in part because of broader diagnostic criteria, greater awareness of autism, and improved access to assessment.”

Discussing Potential Autistic Traits / Likelihood

Neuroaffirming (Widely Preferred) Language:

- ✓ **Experiences or traits consistent with those who are Autistic**
- ✓ **Increased likelihood of being Autistic**
- ✓ **May be Autistic**
- ✓ **Possible indicators of autism**

Less Preferred Language: At risk of autism, concerns, red flag, warning sign.

Neutral, observational language such as “possible indicators of autism,” “may be Autistic, or “increased likelihood of being Autistic” describes what is being noticed without assigning judgement. This approach focuses on observation, understanding, and exploration rather than fear or risk. In contrast, terms like “red flag,” “warning sign,” and “at risk” can frame autism as something negative, dangerous, or to be feared or prevented.

Examples:

“Mike's repetitive behaviours are a possible indicator of autism.”

“The experiences you are describing are consistent with the experiences of many Autistic people.”

“Because there is one Autistic child in a family, there is an increased likelihood of the second child also being Autistic.”

“Based on what you have shared, you may be Autistic.”

Describing Co-Occurrence

Neuroaffirming (Widely Preferred) Language:

- ✓ **Co-existing**
- ✓ **Co-occurring**
- ✓ **Multiply neurodivergent**

Less Preferred Language: Co-morbidity.

Terms like “co-occurring” and “co-existing” are neutral, descriptive terms that can apply to a wide range of overlapping experiences, whether they relate to health, disability, or neurodivergence. For those wanting to highlight specifically that they experience more than one form of neurodivergence, the term “multiply neurodivergent” is also widely used within the neurodivergent community. These terms acknowledge intersecting experiences without implying that neurodivergence is disease or illness, as medical terms like “co-morbidity” can.

Examples:

“Maya thrives in the classroom when they have access to a quiet sensory space, which helps them navigate co-occurring sensory processing differences and anxiety.”

“Riley is multiply neurodivergent. They are Autistic and ADHD.”

Glossary

A

C

D

E

F

H

I

L

M

N

O

P

R

S

T

U

V

W

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Quick Reference Table

Page	Neuroaffirming (Widely Preferred) Language	Less Preferred Language
11	✓ Autism ✓ Autistic ✓ Neurodivergent ✓ Neurotype ✓ On the spectrum	✕ Asperger's ✕ Autism Spectrum Condition (ASC) ✕ Autism Spectrum Disorder (ASD) ✕ Differently abled ✕ Disease ✕ Disorder ✕ Illness
12	✓ Autistic (capital A)	✕ autistic (lowercase a)
13	✓ Describing the autism spectrum as multidimensional	✕ Describing the autism spectrum as linear
14	✓ Autism Acceptance Day / Month ✓ World Autism Day / Month	✕ Autism Awareness Day / Month
15	✓ Autistic ✓ Autistic individual ✓ Autistic people ✓ Autistic person	✕ Person-first language (e.g., person with autism)
16	✓ Identity-first language: Autistic, Autistic individual, Autistic people, Autistic person.	✕ Affected by ✕ Cases ✕ Impacted by ✕ Patients ✕ Suffers from
17	✓ Communicates beyond spoken words / in many ways ✓ Nonspeaking ✓ Sometimes / at times nonspeaking	✕ Limited speech ✕ Nonverbal (when used as a label for a person) ✕ Selectively verbal
18	✓ "Nonverbal" used to describe a different form of communication, with consideration of context and framing.	✕ "Nonverbal" used to describe a different form of communication, without consideration of context and framing.

Page	Neuroaffirming (Widely Preferred) Language	Less Preferred Language
20	✓ Neutral facial expressions ✓ Sensory processing differences ✓ Specific Autistic experiences, features, traits, or characteristics ✓ Uses less eye contact	× Difficulty with facial expressions, impairments × Poor eye contact × Sensory processing disorder × Symptoms × Tendencies.
21	✓ Masking	× Hiding traits × Passing as neurotypical
22	✓ Area of expertise ✓ Focused interest(s) ✓ Passion(s) / passionate	× Fixation × Obsessed × Rigid interests × Special interests
23	✓ Describe specifically what is directly observed (e.g., covering ears, pacing, not responding to questions) ✓ Describe what the person reports experiencing, where appropriate	× Challenging behaviour × Disruptive behaviour × Outburst × Problem behaviour × Tantrum
25	✓ Accommodations / adjustments ✓ Naming the specific supports and services ✓ Support(s)	× Cure × Fix × Intervention × Prevention × Treat × Treatment
26	✓ Naming the specific support needs of a person ✓ Varied / variable support needs	× High-functioning × High support needs × Low-functioning × Low support needs × Mild × Moderate × Severe × Special needs

Page	Neuroaffirming (Widely Preferred) Language	Less Preferred Language
27	✓ Executive functioning	✕ Executive dysfunction
27	✓ Support person	✕ Caregiver ✕ Caretaker.
28	✓ Accessible	✕ Disabled (when describing spaces or facilities) ✕ Handicapped
29	✓ A better understanding of autism and broader diagnostic criteria ✓ Improved access to assessment and diagnosis ✓ More Autistic people are being formally identified ✓ Reported autism prevalence has increased	✕ Autism crisis ✕ Epidemic ✕ Surge in autism
31	✓ Experiences or traits consistent with those who are Autistic ✓ Increased likelihood of being Autistic ✓ May be Autistic ✓ Possible indicators of autism	✕ At risk of autism ✕ Concerns ✕ Red flag ✕ Warning sign
32	✓ Co-existing ✓ Co-occurring ✓ Multiply neurodivergent	✕ Co-morbidity

Feedback and Ongoing Learning

Language shapes how people are understood and included. Approaching language with care is an ongoing practice. As language evolves through listening and learning, we welcome feedback from readers whose experiences or perspectives differ from what is reflected here. You can contact Sinneave's Communications and Marketing team at info@sinneavefoundation.org